

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | ID NO.   | DATE   |
|---------------------------|----------|----------|--------|
| FEE DETERMINATION         |          |          |        |
| O.I.P.E. CLASSIFIER       |          |          | 11/14  |
| FORMALITY REVIEW          |          | 12-13-14 |        |
| RESPONSE FORMALITY REVIEW |          |          | 2-1-15 |

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 - ..... Restricted      O ..... Objected

| Claim             | Date     |
|-------------------|----------|
| Final<br>Original |          |
| 1                 | 12/15/14 |
| 2                 | 12/15/14 |
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| Claim             | Date |
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| Claim             | Date |
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If more than 150 claims or 10 actions  
staple additional sheet here

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